

TASK FORCE COMMITTEE APPLICATION FORM

Thank you for your interest in volunteering for the City of Maricopa. With this application, please attach an up-to-date **resume** and **cover letter** about yourself. Please fill out the following form and return it to the City Clerk by one of the following means:

<u>Email - Fax - Questions</u> Email: vanessa.bueras@maricopa-az.gov Fax: 520-568-9120 Questions?: 520-316-6971	<u>By Mail</u> City Clerk City of Maricopa P.O. Box 610 Maricopa, AZ 85139	<u>In Person</u> City Clerk City of Maricopa 45145 W. Madison Ave Maricopa, AZ 85139
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Contact Information	
Name:	
Address:	
City, State, Zip:	
Email:	
Home Phone:	Cell Phone:
General Information	
What Task Force are you applying for?	
Briefly tell us about your experience and education	
Briefly tell us why you want to serve on this task force	



When are you available for meetings?				
Briefly explain your experience with community regulations such as design guidelines and standards, CC&R's, or Zoning Codes				
Are you a graduate of the City of Maricopa Citizens Leadership Academy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If so, what year did you graduate? _____	
Are you at least 18 years old and registered to vote in Pinal County?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you lived within the City's Incorporated Limits for at least one year?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have You Served On Any Boards, Commissions, Committees, or Task Forces In the Past? PLEASE NOTE THAT YOU CAN ONLY SERVE ON ONE BOARD OF COMMITTEE AT A TIME	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
	If so, Please List:			

PLEASE NOTE THAT THIS APPLICATION IS CONSIDERED PUBLIC RECORD AND MAY BE POSTED ON THE CITY'S WEBSITE

Signature of Applicant:

Date:

FOR OFFICE USE ONLY
Application Received On:

